

APPROVED

for

PTO DEPOSIT ACCOUNT CHARGE

ACCOUNT# 04-1709

Express Mail Number: EV272909140US

Date Deposited: 08/15/2003

PTO/SB/05 (11-00)

Approved for use through 10/31/2002-OMB 0651-0032
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

03943 U.S. PTO

10/642248



08/15/03

UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No. 3554.097 First Inventor Paul L. DeAngelis et al. Title TARGETED GLYCOSAMINOGLYCAN POLYMERS BY POLYMER GRAFTING AND METHODS OF MAKING AND USING SAME Express Mail Label No. EV272909140US	
(Only for new nonprovisional applications under 37 CFR 1.53(b))			

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Mail Stop Patent Appl., Comm. for Patents PO Box 1450 Alexandria, VA 22313-1450
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages 129] <i>(preferred arrangement set forth below)</i> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description -Redline Specification ____ pgs - Claim(s) -Clean Specification ____ pgs - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 41] 5. Oath or Declaration [Total Pages 2] a. <input checked="" type="checkbox"/> Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input checked="" type="checkbox"/> Other: SEE BELOW
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18. This application is:	
<input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP)	of prior application No.: _____
Prior application information: _____	Examiner: _____
Group Art Unit: _____	
<input type="checkbox"/> As a CON, DIV, or CIP, this application contains one or more changes to (1) the specification; (2) drawings; or (3) claims in the above-identified prior application. A red-line version of the application showing these changes will be made available to the examiner upon request.	

19. CORRESPONDENCE ADDRESS	
<input checked="" type="checkbox"/> Customer Number or Bar Code Label	30589 <i>(Insert Customer No. or Attach bar code label here)</i>
or <input type="checkbox"/> Correspondence address below	
Name: Dunlap, Codding & Rogers, P.C.	
Address: P. O. Box 16370	
City: Oklahoma City	State: OK
Country: USA	Zip Code: 73113
Telephone: (405) 607-8600	Fax: (405) 607-8686

Name (Print/Type): Douglas J. Sorocco	Registration No. (Attorney/Agent): 43,145
Signature:	Date: 8-15-03

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 Alexandria, VA 22313-1450

17) 1. Utility Patent Application Transmittal (1 page); 2. Fee Transmittal (1 page) Authorizing the Commissioner to charge indicated fees of \$1,446.00 (which include Utility filing fee of \$375.00, Extra Claim fee of \$1,071.00) or any additional fee required and/or credit any overpayments to Deposit Account Name Dunlap, Codding & Rogers, P.C. 3. Patent Application Fee Determination Record (1 page); 4. Complete Application for Publication (129 pages) including: (A) Specification (111 pages); (B) 111 Claims (17 pages); (C); Abstract (1 page); 5. Unsigned Declaration for Utility or Design Patent Application (2 pages); 6. Formal Drawings with labels (41 sheets); (Identifying indicia in the top margin of each sheet (37 CFR 1.84(c)); 7. Return receipt postcard

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FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1,446

Complete if Known

Application Number	Not Yet Assigned
Filing Date	Herewith
First Named Inventor	Paul L. DeAngelis
Examiner Name	Unknown
Art Unit	Unknown
Attorney Docket No.	3554.097

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ None

☒ Deposit Account:

Deposit
Account
Number
Deposit
Account
Name

04-1700

Dunlap, Coddling & Rogers, P.C.
 Customer No. 30589

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 750	2001 375	Utility filing fee	375
1002 330	2002 165	Design filing fee	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	

SUBTOTAL (1) (\$) 375

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
111	91	9	\$819
9	6	42	\$252
Multiple Dependent			\$0

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 84	2201 42	Independent claims in excess of 3
1203 280	2203 140	Multiple dependent claim, if not paid
1204 84	2204 42	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 1,071

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 410	2252 205	Extension for reply within second month	
1253 930	2253 465	Extension for reply within third month	
1254 1,450	2254 725	Extension for reply within fourth month	
1255 1,970	2255 985	Extension for reply within fifth month	
1401 320	2401 160	Notice of Appeal	
1402 320	2402 160	Filing a brief in support of an appeal	
1403 280	2403 140	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,300	2453 650	Petition to revive - unintentional	
1501 1,300	2501 650	Utility issue fee (or reissue)	
1502 470	2502 235	Design issue fee	
1503 630	2503 315	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 750	2809 375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 750	2810 375	For each additional invention to be examined (37 CFR 1.129(b))	
1801 750	2801 375	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 0

SUBMITTED BY

Name (Print/Type)

Douglas J. Sorocco

Registration No.
(Attorney/Agent)

43,145

(Complete if applicable)

Telephone (405) 607-8600

Signature

Date

08/15/2003

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DUNLAP, CODDING & ROGERS, P.C.

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PATENT APPLICATION FEE DETERMINATION RECORD					Application or Docket Number 3554.097	
CLAIMS AS FILED - PART I					SMALL ENTITY OR OTHER THAN SMALL ENTITY	
(Column 1)		(Column 2)				
FOR	NUMBER FILED	NUMBER EXTRA			RATE	FEE
BASIC FEE (37 CFR 1.16(a))						\$ 375
TOTAL CLAIMS (37 CFR 1.16(c))		111	minus 20 =	* 91	x \$ 9 =	819
INDEPENDENT CLAIMS (37 CFR 1.16(b))		9	minus 3 =	* 6	x 42 =	252
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					+ 140 =	0
					TOTAL	1446
* If the difference in column 1 is less than zero, enter "0" in column 2						
CLAIMS AS AMENDED - PART II					SMALL ENTITY OR OTHER THAN SMALL ENTITY	
(Column 1)		(Column 2)		(Column 3)		
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total (37 CFR 1.16(c))	*	Minus	** 20	=	0
	Independent (37 CFR 1.16(b))	*	Minus	*** 3	=	0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					
				TOTAL ADDIT. FEE		
				0		
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total (37 CFR 1.16(c))	*	Minus	**	=	
	Independent (37 CFR 1.16(b))	*	Minus	***	=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					
				TOTAL ADDIT. FEE		
				0		
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total (37 CFR 1.16(c))	*	Minus	**	=	
	Independent (37 CFR 1.16(b))	*	Minus	***	=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					
				TOTAL ADDIT. FEE		
				0		

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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